

COCHISE COUNTY GRANT APPROVAL FORM

Form Initiator: Date Prepared:

Point of Contact: Phone Number

Department:

PRIMARY GRANT

Primary Grantor: CFDA:

Grant Title:

Grant Term From: To: Total Award Amount:

New Grant: ☒ Yes ☐ No Grant No.:

Amendment No.:

Funding No.: If new, Finance will assign a funding number.

Strategic Plan: District: Mandated by Law? ☐ Yes ☐ No

Number of Positions Funded: Asset(s) Acquired:

Briefly describe the purpose of the grant.

The purpose of the Stone Garden grant is to assist the US Border Patrol in combating illegal immigration and drug smuggling; and to capture and prosecute or deter those who engage in these activities from continuing these actions.

If this is a mandated service, cite the source. If not mandated, cite indications of local customer support for this service.

This service is is not necessarily a mandate for the Sheriff's Office. However, part of the duty in working this operation is keep the peace, (ARS11-441) which is a mandated function of the Sheriff's Office.

PRIMARY FUNDING SOURCE:

Funding Year:	2013/Reallocation	Federal Funds 332.100	189,000
		State Funds 336.100	
		County Funds 391.000	
		Other Funds:	
		Total Funds:	
Funding Year:		Federal Funds 332.100	
		State Funds 336.100	
		County Funds 391.000	
		Other Funds:	
		Total Funds:	
Funding Year:		Federal Funds 332.100	
		State Funds 336.100	
		County Funds 391.000	
		Total Revenue:	

Has this amount been budgeted? ☐ Yes ☒ No

Method of collecting funds: ☐ Lump Sum ☐ Quarterly ☐ Draw ☒ Reimbursement

Is revertment of unexpended funds required at the end of grant period? ☐ Yes ☒ No

(a) Total A-87 Cost Allocation: 35,910 (b) Amount of overhead allowed by grant: 0

County Subsidy (a) - (b): 0

Does Grantor accept indirect costs as an allowable expenditure? ☐ Yes ☒ No

If yes, dollar amount or percentage allowed:

Second Grantor:

Grant Term From: To:

Secondary Award Amount:

Grant No.:

Amendment No.:

Funding Year: Federal Funds 332.100

State Funds 336.100

County Funds 391.000

Other Funds:

Funding Year: Federal Funds 332.100

State Funds 336.100

County Funds 391.000

Other Funds:

Total Revenue:

Has this amount been budgeted? ☐ Yes ☐ No

Method of collecting funds: ☐ Lump Sum ☐ Quarterly ☐ Draw ☐ Reimbursement

Is revertment of unexpended funds required at the end of grant period? ☐ Yes ☐ No

(a) Total A-87 Cost Allocation: (b) Amount of overhead allowed by grant:

County Subsidy (a) - (b):

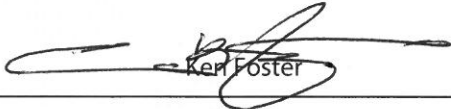
Does Grantor accept indirect costs as an allowable expenditure? ☐ Yes ☐ No

If yes, dollar amount or percentage allowed:

Is County match required? ☐ Yes ☒ No

County Match Source:

County match dollar amount or percentage:

Signature:  _____

Board Approval: _____ Date _____

Print Form

Submit by Email to Finance

Please e-mail completed form to Finance ldevore@cochise.az.gov.

NOTE: Once approved by the Board of Supervisors, the department is responsible for sending a copy of the fully executed grant document to the Finance Department